



Patent
Attorney's Docket No. 1018775-000842

W
RCE
#

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Hiroshi Sumiyama et al.

Application No.: 09/955,963

Filing Date: September 20, 2001

Title: IMAGE FORMING APPARATUS
INCORPORATING NO IMAGE
MEMORY WITH MEMORY RECALL
FUNCTION

) **MAIL STOP RCE**

) Group Art Unit: 2625

) Examiner: VU B HANG

) Confirmation No.: 1910

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL LETTER**

MAIL STOP RCE

Customer Number **21839**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 of the above-identified application and encloses the ☐ \$395 ☒ \$790 fee due under 37 C.F.R. § 1.17(e).

1. ☒ A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

☐ B. Applicant(s) previously submitted the following documents for which continued examination is requested:

☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.

☐ Other: _____

2. The following documents are enclosed with this submission:

☒ Amendment/Reply

☐ Affidavit(s)/Declaration(s)

☐ Information Disclosure Statement

☒ Petition for Extension of Time

09/25/2007 SZEWDIE1 00000116 09955963

01 FC:1801

790.00 OP

Buchanan Ingersoll & Rooney PC
Attorneys & Government Relations Professionals

The PTO did not receive the following
listed item(s) credit + corr for \$1840
. but only \$1240

- ☐ Other:
3. ☐ Small entity status is hereby claimed.
- ☒ No additional claim fee is required.
- ☒ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

					FEES
Examination Fee (1801)					\$ 790
	No. of Claims		Extra Claims	Rate	
Total Claims	20	20	0	x 50 (1202)	\$ 0
Independent Claims	6	3	3	x 200 (1201)	\$ 600
If multiple dependent claims are presented, add \$ 360					\$ 0
Total Fee					\$ 1390
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					\$ 0
TOTAL FEE DUE					\$ 1390

4. ☐ Charge _____ to Deposit Account No. **02-4800** for the fee due.
5. ☐ A check in the amount of _____ is enclosed for the fee due.
6. ☒ Charge **\$ 1390** to credit card for the fee due. Form PTO-2038 is attached.
7. ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
8. ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,
BUCHANAN INGERSOLL & ROONEY PC

Date: September 24, 2007

By: William C. Rowland
William C. Rowland
Registration No. 30888

P.O. Box 1404
Alexandria, VA 22313-1404
703 836 6620